## USM-285 is a 5-part form. Fill out the form and print 5 copies. Sight as needed and route as specified below.

U.S. Department of Justice United States Marshals Service

# PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

GARRISON S. JOHNSON DEFENDANT G. ZAVALA, et al.  SERVE AT  NAME OF INDIVIDUAL, COMPANY, F. Wynn, Correctional Counselor ADDRESS (Street or RFD, Apartment No. P.O. Box 1020 Soledad, CA 9396 END NOTICE OF SERVICE COPY TO REQUESTER AT  Garrison S. Johnson, D59672	r, Salir o., City 50-102	nas Valley Sta , State and ZIP C	ate Prison	S	C-07-5578-SBA(P) TYPE OF PROCESS Summons, Compla		der
SERVE F. Wynn, Correctional Counselor ADDRESS (Street or RFD, Apartment Notes of Notice of Service Copy to Requester at the Notice Copy to R	r, Salir o., City 50-102	nas Valley Sta , State and ZIP C	ate Prison			int, Or	der
F. Wynn, Correctional Counselor ADDRESS (Street or RFD, Apartment No. 1020 Soledad, CA 9396 END NOTICE OF SERVICE COPY TO REQUESTER AT	r, Salir o., City 50-102	nas Valley Sta , State and ZIP C	ate Prison	SCRIPTION			
AT ADDRESS (Street or RFD, Apartment N-P.O. Box 1020 Soledad, CA 9396) END NOTICE OF SERVICE COPY TO REQUESTER AT	o., City 60-102	, State and ZIP (			ON OF PROPERTY TO	O SEIZE	OR CONDEM
P.O. Box 1020 Soledad, CA 9396 END NOTICE OF SERVICE COPY TO REQUESTER AT	60-102						
END NOTICE OF SERVICE COPY TO REQUESTER AT			Code)				
	r NAM	20					
Garrison S. Johnson, D59672		E AND ADDRE	SS BELOW		ber of process to be		
Garrison S. Johnson, D59672				serve	d with this Form 285	3	
				Num	ber of parties to be		
California Correctional Institution P.O. Box 1906		served in this case		5			
Tehachapi, CA 93581		Chec on U	k for service S.A.				
						ļ	
PECIAL INSTRUCTIONS OR OTHER INFORMATION Il Telephone Numbers, and Estimated Times Available fo			IN EXPEDITING SE	RVICE ( <u>I</u>	nclude Business and A	<u>liternate</u>	: Addresses.
		·					<u>_</u> F
<b>N</b>							
the of Attack the officer requesting convices on	babalf	of Ed		TEI EDUC	ONE NUMBER	DAT	
gnature of Attorney other crising requesting service on	benam	(E.E.)	PLAINTIFF				
JESSHE MOST FY			DEFENDANT	510-63	37-3536	9/1	0/08
SPACE BELOW FOR USE OF U.S.	MA	RSHAL O	NLY DO NO	DT WI	RITE BELOW	THI	S LINE
acknowledge receipt for the total Total Process Distric		District to	Signature of Author	rized USM	Date		
Imber of process indicated. Origin Or	1	Serve					
an one USM 285 is submitted) No		No					
nereby certify and return that I \(\sime\) have personally served	,□ ha	ve legal evidence	e of service, 🗌 have	executed	as shown in "Remarks	", the pr	ocess described
the individual, company, corporation, etc., at the address	shown	above on the on	the individual, compa	any, corpo	oration, etc. shown at th	e addre	s inserted belo
I hereby certify and return that I am unable to locate the	individ	dual, company, c	orporation, etc. named	d above (S	ee remarks below)		
ame and title of individual served (if not shown above)					A person of suit		
					then residing in of abode	defendai	it's usual place
ddress (complete only different than shown above)					Date	Time	
					Signature of U.S. Ma	arshal of	Deputy
			I A donor Donoria	T A	at a salta II C. March	01 <b>*</b> 0#	
rvice Fee Total Mileage Charges Forwarding Fee including endeavors)	. [ ]	otal Charges	Advance Deposits		nt owed to U.S. Marsh unt of Refund*)	ar or	
					<b>#</b> 0.0		
					\$0.0	U	
EMARKS:							

- 2. USMS RECORD
- 3. NOTICE OF SERVICE
- 4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
- 5. ACKNOWLEDGMENT OF RECEIPT

Form USM-285 Rev. 12/15/80 Automated 01/00

Please type or print legibly, insuring readability of all copies. DO NOT DETACH ANY COPIES. Submit one complete set of this form (USM-285) and one copy of each writ for each individual, company, corporation, etc., to be served or property to be seized or condemned. The applicable fees for such service(s) (T28, USC Sec. 1921 establishes the fees for service of process by the U.S. Marshal) may be required prior to said service.

For service of any process upon an officer or agent of the United States Government, submit a copy of the writ and a set of Form USM-285 for each officer or agent upon whom service is desired. Submit three (3) additional copies of the writs for service upon the Government of the United States. The U.S. Marshal will serve one (1) upon the U.S. Attorney and will forward two (2) to the Attorney General of the United States. (When the applicable box is checked, completion of the final signature block by the U.S. Marshal or his Deputy always certifies service on the U.S. Attorney and the Attorney General, regardless of whether other defendants on the writ were served.) Failure to provide any of the copies will delay service of the writ

Complete all entries above the double line. Mark all applicable check boxes and use the "Special Instructions" to advise of any information that will assist the U.S. Marshal in expediting service.

If more than one writ and USM-285 is submitted on a single case, the U.S. Marshal will receipt for all of them on the first USM-285. You will receive for your records the last (No. 5) "Acknowledgment of Receipt" copy for all the USM-285 forms you submit. When the writ is served, you will receive the No. 3 Notice of Service copy. This copy will be identical to the return to the Clerk of the Court.

Upon completion of all services (if the Marshals fees were not requested or tendered in advance or if additional fees are indicated), you will receive a "Billing Statement" (copy 4 of USM-285) from the United States Marshal. (NOTE: Copy 4 should be returned, by you, to the U.S. Marshal, together with your payment of the amount owed.

U.S. Department of Justice United States Marshals Service

# PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF GARRISON	S. JOHNSON				4	COURT CASE NUMI -07-5578-SBA(P		
DEFENDANT	0. 7011110011			ACCIDICATION OF THE PROPERTY O		YPE OF PROCESS	1()	
G. ZAVALA,	et al.				Summons, Complaint, Order			der
	NAME OF INDIVIDU	JAL, COMPANY, CO	DRPORATION. ETC	C. TO SERVE OR DE	SCRIPTIO	N OF PROPERTY T	O SEIZI	E OR CONDEMN
SERVE	K. Traynham, Cor	rectional Sergean	t, Salinas Valley	State Prison				
AT )	ADDRESS (Street or I	RFD, Apartment No.,	City, State and ZIP	Code)				
•	P.O. Box 1020 So	ledad, CA 93960-	-1020					
SEND NOTICE	OF SERVICE COPY TO	REQUESTER AT N	AME AND ADDRI	ESS BELOW	Numb	er of process to be		0
	,				served	with this Form 285	3	
l Ga	arrison S. Johnson, I	059672			Numb	er of parties to be		
	lifornia Correctiona	l Institution				in this case	5	
	O. Box 1906 hachapi, CA 93581				Class	C		
				on U.S	for service S.A.			
All Telephone N	jumbers, and Estimated	Times Available for S	Service):					Fold
Signature of Atto	rney other Originator red	uesting service on bel	half of:	PLAINTIFF	TELEPHON	IE NUMBER	DAT	E
*	DESONE AND	SKEY		DEFENDANT	510-637	7-3536	9/1	0/08
SPACE B	ELOW FOR U	SK OF U.S. M	IARSHAL O	NLY DO NO	OT WR	ITE BELOW	THI	S LINE
	<del></del>	al Process District o	7	Signature of Author				Date
number of proces (Sign only for US	1	Origin	Serve					
than one USM 28		No	No					
I hereby certify a on the individual	nd return that I  have , company, corporation,	personally served, _ etc., at the address sho	have legal evidenc own above on the on	e of service, have the individual, comp	executed a any, corpor	as shown in "Remark ation, etc. shown at tl	s", the prine addres	ocess described ss inserted below.
☐ I hereby cert	ify and return that I am u	nable to locate the inc	dividual, company, c	orporation, etc. named	d above (Se	e remarks below)		
Name and title of	individual served (if not	shown above)				A person of suit then residing in of abode		
Address (complete	e only different than show	wn above)				Date	Time	☐ am ☐ pm
						Signature of U.S. M	arshal or	Deputy
Service Fee	Total Mileage Charges including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	1	t owed to U.S. Marsh nt of Refund*)	al* or	
						\$0.0	0	
REMARKS:								
DINA TE CONTRA	1. CLERK OF THE	COUPT				DD I OD	EDITIO	NS MAY BE USEI

- 2. USMS RECORD
- 3. NOTICE OF SERVICE
- 4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
- 5. ACKNOWLEDGMENT OF RECEIPT

Please type or print legibly, insuring readability of all copies. DO NOT DETACH ANY COPIES. Submit one complete set of this form (USM-285) and one copy of each writ for each individual, company, corporation, etc., to be served or property to be seized or condemned. The applicable fees for such service(s) (T28, USC Sec. 1921 establishes the fees for service of process by the U.S. Marshal) may be required prior to said service.

For service of any process upon an officer or agent of the United States Government, submit a copy of the writ and a set of Form USM-285 for each officer or agent upon whom service is desired. Submit three (3) additional copies of the writs for service upon the Government of the United States. The U.S. Marshal will serve one (1) upon the U.S. Attorney and will forward two (2) to the Attorney General of the United States. (When the applicable box is checked, completion of the final signature block by the U.S. Marshal or his Deputy always certifies service on the U.S. Attorney and the Attorney General, regardless of whether other defendants on the writ were served.) Failure to provide any of the copies will delay service of the writ.

Complete all entries above the double line. Mark all applicable check boxes and use the "Special Instructions" to advise of any information that will assist the U.S. Marshal in expediting service.

If more than one writ and USM-285 is submitted on a single case, the U.S. Marshal will receipt for all of them on the first USM-285. You will receive for your records the last (No. 5) "Acknowledgment of Receipt" copy for all the USM-285 forms you submit. When the writ is served, you will receive the No. 3 Notice of Service copy. This copy will be identical to the return to the Clerk of the Court.

Upon completion of all services (if the Marshals fees were not requested or tendered in advance or if additional fees are indicated), you will receive a "Billing Statement" (copy 4 of USM-285) from the United States Marshal. (NOTE: Copy 4 should be returned, by you, to the U.S. Marshal, together with your payment of the amount owed.

U.S. Department of Justice United States Marshals Service

# PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF GARRISON	I S. JOHNSON					- 1	COURT CASE NUMI C-07-5578-SBA(P		
DEFENDANT							YPE OF PROCESS		
G. ZAVALA	A, et al.					S	ummons, Compla	aint, O	rder
	NAME OF INDIV	IDUAL, COM	PANY, COF	RPORATION. ETC	C. TO SERVE OR DE	SCRIPTIO	ON OF PROPERTY T	O SEIZ	E OR CONDEMN
SERVE <	A. Hedgpeth, C								
AT	ADDRESS (Street				Code)				
SEND NOTICE	P.O. Box 1020 F OF SERVICE COPY				SS RELOW	Т		1	A CONTRACTOR OF THE CONTRACTOR
							per of process to be d with this Form 285	3	
C	Garrison S. Johnso California Correcti CO. Box 1906		ion			1	per of parties to be	5	
	ehachapi, CA 935	581				Check on U.S	for service S.A.		
SPECIAL INS	TRUCTIONS OR OT	HER INFORM	ATION THA	AT WILL ASSIST	IN EXPEDITING SE	 RVICE <i>(In</i>	iclude Business and	-l Alternat	e Addresses.
All Telephone	Numbers, and Estima					,			
<u>d</u>									Fold
	$\mathcal{U}$								
C:	1)	<u> </u>	rias on bobo	Jfof 57		TEI EDUO	NE NUMBER	DAT	<b>T</b>
Signature of Att	JESSIE AAR	r requesting ser	vice on bena		PLAINTIFF				
					DEFENDANT	510-63			0/08
SPACE 1	BELOW FOR	USE OF	U.S. MA	ARSHAL O	NLY DO NO	T WR	RITE BELOW	THI	S LINE
number of proce		<b>Fotal Process</b>	District of Origin	District to Serve	Signature of Author	rized USM	S Deputy or Clerk		Date
than one USM 2	285 is submitted)		No	No					
I hereby certify on the individua	and return that I hal, company, corporati	nave personally ion, etc., at the	served, $\square$ address shov	have legal evidence on above on the on	e of service, have the individual, compa	executed any, corpor	as shown in "Remark ration, etc. shown at the	s", the p he addre	rocess described ss inserted below.
☐ I hereby ce	ertify and return that I	am unable to lo	cate the indi-	vidual, company, c	orporation, etc. named	l above (Se	ee remarks below)		
Name and title of	of individual served <i>(ij</i>	f not shown abo	ve)				A person of suit then residing in of abode	able age defenda	and discretion nt's usual place
Address (compl	ete only different than	shown above)					Date	Time	☐ am ☐ pm
							Signature of U.S. M	arshal o	r Deputy
Service Fee	Total Mileage Cha	-	ling Fee	Total Charges	Advance Deposits		nt owed to U.S. Marshint of Refund*)	al* or	
							\$0.0	0	
REMARKS:					1				
	IES: 1. CLERK OF	TUE COURT					PRI∩R	EDITIO	NS MAY BE USED
PRINT <i>S CO</i> B	HECKE I. CLERK OF	INE COURT					IKIOK	EDITIO	HO MY I DE COEF

- 2. USMS RECORD
- 3. NOTICE OF SERVICE
- 4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
- 5. ACKNOWLEDGMENT OF RECEIPT

Form USM-285 Rev. 12/15/80 Automated 01/00

Please type or print legibly, insuring readability of all copies. DO NOT DETACH ANY COPIES. Submit one complete set of this form (USM-285) and one copy of each writ for each individual, company, corporation, etc., to be served or property to be seized or condemned. The applicable fees for such service(s) (T28, USC Sec. 1921 establishes the fees for service of process by the U.S. Marshal) may be required prior to said service.

For service of any process upon an officer or agent of the United States Government, submit a copy of the writ and a set of Form USM-285 for each officer or agent upon whom service is desired. Submit three (3) additional copies of the writs for service upon the Government of the United States. The U.S. Marshal will serve one (1) upon the U.S. Attorney and will forward two (2) to the Attorney General of the United States. (When the applicable box is checked, completion of the final signature block by the U.S. Marshal or his Deputy always certifies service on the U.S. Attorney and the Attorney General, regardless of whether other defendants on the writ were served.) Failure to provide any of the copies will delay service of the writ

Complete all entries above the double line. Mark all applicable check boxes and use the "Special Instructions" to advise of any information that will assist the U.S. Marshal in expediting service.

If more than one writ and USM-285 is submitted on a single case, the U.S. Marshal will receipt for all of them on the first USM-285. You will receive for your records the last (No. 5) "Acknowledgment of Receipt" copy for all the USM-285 forms you submit. When the writ is served, you will receive the No. 3 Notice of Service copy. This copy will be identical to the return to the Clerk of the Court.

Upon completion of all services (if the Marshals fees were not requested or tendered in advance or if additional fees are indicated), you will receive a "Billing Statement" (copy 4 of USM-285) from the United States Marshal. (NOTE: Copy 4 should be returned, by you, to the U.S. Marshal, together with your payment of the amount owed.

## USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice United States Marshals Service

# PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

DEFENDANT 3. ZAVALA, et al.  TYPE OF PROCESS Summons, Complaint, Order  NAME OF INDIVIDUAL, COMPANY, CORPORATION ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEM;  SERVE AT  OR Zavala, Correctional Captain, Salimas Valley State Prison ADDRESS (Street or RED. Apartment No. City. Sine and ZIP Code) P.O. Box 1020 Soledad, CA 93960-1020  SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW  SERVICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW  California Correctional Institution P.O. Box 1906 Tehachapi, CA 93581  SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Atternate Addresses.  All Telephone Numbers, and Estimated Times Available for Service):  SPACE BELOW FOR USE OF U.S. MARSHAL ONLY—DO NOT WRITE BELOW THIS LINE solvowledge receipt for del total unable of process indicated.  Solve only for USA 35 if more have personally served. In No. No. No. No. No. No. No. Date Signature of Authorized USMS Deputy or Clerk Date Signature of Authorized USMS Deputy or Clerk Date Signature of the Individual Served (if not shown above)  Inhereby certify and return that I am unable to locate the individual, company, corporation, etc. shown at the address inserted below  Anderess (complete only different than shown above)  Inhereby certify and return that I am unable to locate the individual, company, corporation, etc. shown at the address inserted below  Anderess (complete only different than shown above)  Inhereby certify and return that I am unable to locate the individual, company, corporation, etc. shown at the address inserted below  Anderess (complete only different than shown above)  Inhereby certify and return that I am unable to locate the individual, company, corporation, etc. shown at the address inserted below  Signature of U.S. Marshal or Deputy  Signature of U.S. Marshal or Deputy  Signature of U.S. Marshal or Deputy  Signature of Science only different than shown above)  Solve the service on the only different than shown above)	PLAINTIFF GARRISON	S. JOHNSON				COURT CASE NUME C-07-5578-SBA(P	1		
SERVE AT    C. Aavala, Correctional Captain, Salinas Valley State Prison   ADDRESS (Stree or RFD. Apartment No. City. State and ZIP Code)   P.O. Box 1020 Soledad, CA 93960-1020   SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW   Service with this Form 285   3     Garrison S. Johnson, D59672   California Correctional Institution   P.O. Box 1906   Tehachapi, CA 93581   Check for service on U.S.A.   SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses. All Telephone Numbers, and Estimated Times Available for Service)   SPACE BELION FOR USE OF U.S. MARSHAL ONLY DO NOT WRITE BELOW THIS LINE	DEFENDANT								
SERVE AT ADDRESS (Greet or RED. Aparment No. City, State and 2IP Code) P.O. Box 1020 Soledad, CA 93960-1020  SEND NOTICE OF SERVICE COPY TO REQUISTER AT NAME AND ADDRESS BELOW  SEND NOTICE OF SERVICE COPY TO REQUISTER AT NAME AND ADDRESS BELOW  Served with this Form 283 3  Garrison S. Johnson, D59672 California Correctional Institution P.O. Box 1906 Tehachapi, CA 93581  SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses.  All Telephone Numbers, and Estimated Times Available for Service):  Following the process indicated Systems of Process of Systems of Process of Systems of Process of Systems of Process of Systems o	G. ZAVALA	, et al.				Summons, Complaint, Order			
AT ADDRESS (Street or RFD. Apartment No. City. State and ZIP Code) P.O. Box 1020 Soledad, CA 93960-1020  SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW  SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW  Number of process to be served with this from 285  California Correctional Institution P.O. Box 1906 Tehachapi, CA 93581  SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses.  All Telephone Numbers, and Estimated Times Available for Service):  Following the process in the service on behalf of:  DEFENDANT  SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses.  All Telephone Numbers, and Estimated Times Available for Service):  Following the process indicated Systems of the Company of the Continuation		NAME OF INDIVIDU	IAL, COMPANY, CO	RPORATION. ETC	C. TO SERVE OR DES	SCRIPTION OF PROPERTY TO	O SEIZE (	OR CONDEMN	
AT ADDRESS (Street or RFD. Apartment No. City. State and ZIP Code) P.O. Box 1020 Soledad, CA 93960-1020  SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW  SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW  Number of process to be served with this from 285  California Correctional Institution P.O. Box 1906 Tehachapi, CA 93581  SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses.  All Telephone Numbers, and Estimated Times Available for Service):  Following the process in the service on behalf of:  DEFENDANT  SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses.  All Telephone Numbers, and Estimated Times Available for Service):  Following the process indicated Systems of the Company of the Continuation	SERVE	4							
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW  SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW  Garrison S. Johnson, D59672 California Correctional Institution P.O. Box 1906 Tehachapi, CA 93581  SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses.  All Telephone Numbers, and Estimated Times Available for Service):  SPACE BELOW FOR USE OF U.S. MARSHAL ONLY—DO NOT WRITE BELOW THIS LINE  Inchanovelege receipt the def total Total Process District of Origin Service on the service on the service on the service on the service of the service on the service	<					***************************************			
Garrison S. Johnson, D59672 California Correctional Institution P.O. Box 1906 Tchachapi, CA 93581  SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses.  All Telephone Numbers, and Estimated Times Available for Service):  For SPACE BELOW FOR USE OF U.S. MARSHAL ONLY—DO NOT WRITE BELOW THIS LINE acknowledge receipt to well total unable of the control of t	,	P.O. Box 1020 Sol	edad, CA 93960-	1020					
Garrison S. Johnson, D59672 California Correctional Institution P.O. Box 1906 Tchachapi, CA 93581  SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses.)  All Telephone Numbers, and Estimated Times Available for Service):  For PLAINTIFF  SPACE BELOW FOR USE OF U.S. MARSHAL ONLY DO NOT WRITE BELOW THIS LINE acknowledge receipt foliate total unmber of process indicated. Sign only for USM 28 if more have now 15 to 10 more indicated. Sign only for USM 28 if more have now 15 to 10 more indicated. Sign only for USM 28 if more have now 15 to 10 more indicated. Sign only for USM 28 if more have now 15 to 10 more individual, company, corporation, etc. shown at the address shown above on the on the individual, company, corporation, etc. shown at the address increde below have and title of individual served (if not shown above)  Interest year of the individual served (if not shown above)  Date  Time  Signature of U.S. Marshal of Deputy  Signature of U.S. Marshal of Deputy  Signature of U.S. Marshal of Deputy  Service Fee  Total Mileage Charges including endenors)  Forwarding Fee  Total Charges  Advance Deposits  Amount owed to U.S. Marshal or Deputy  Service Fee  Total Mileage Charges including endenors)  Forwarding Fee  Total Charges  Advance Deposits  Amount owed to U.S. Marshal or Deputy	SEND NOTICE	OF SERVICE COPY TO	REQUESTER AT N	AME AND ADDRI	ESS BELOW	Number of process to be			
California Correctional Institution P.O. Box 1906 Tchachapi, CA 93581  SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses.  All Telephone Numbers, and Estimated Times Available for Service):  PLAINTIFF DEFENDANT  TELEPHONE NUMBER DATE DATE DEFENDANT  SIgnature of Ayer 25 to 10-637-3536  9/10/08  SPACE BELOW FOR USE OF U.S. MARSHAL ONLY—DO NOT WRITE BELOW THIS LINE acknowledge receipt for 4th total unable of the control of the						•	3		
Tehachapi, CA 93581  Check for service on U.S.A.  SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses.  All Telephone Numbers, and Estimated Times Available for Service):  Figure 1  Signature of AFESSTP 1  Signature of AUthorized USMS Deputy or Clerk  Date  Date  Date  Date  Date  Signature of Authorized USMS Deputy or Clerk  Date  Date  Date  Date  Date  Time  Signature of Authorized USMS Deputy or Clerk  Date  Date  Time  Signature of Authorized USMS Deputy or Clerk  Date  Signature of Authorized USMS Deputy or Clerk  Date  Time  Signature of Authorized USMS Deputy or Clerk  Date  Time  Signature of Authorized USMS Deputy or Clerk  Date  Time  Signature of Authorized USMS Deputy or Clerk  Date  Time  Signature of Authorized USMS Deputy or Clerk  Date  Time  Signature of Authorized USMS Deputy or Clerk  Date  Time  Signature of Authorized USMS Deputy or Clerk  Date  Time  Signature of Authorized USMS Deputy or Clerk  Date  Time  Signature of Authorized USMS Deputy or Clerk  Date  Time  Signature of Authorized USMS Deputy or Clerk  Date  Time  Signature of Authorized USMS Deputy or Clerk  Advance Deposits  Amount owed to U.S. Marshalf or (Amount of Refunds)  Signature of Authorized USMS Deputy or Clerk  Advance Deposits  Amount owed to U.S. Marshalf or (Amount of Refunds)  Signature of Authorized USMS Deputy or Clerk  Signature of Authorized USMS Deputy or Clerk  Date  Time  Signature of Authorized USMS Deputy or Clerk  Date  Signature of Authorized USMS Deputy or Clerk  Date  Signature of Authorized USMS Deputy or Cl	C	alifornia Correctional				5			
Signature of APPS RELOW FOR USE OF U.S. MARSHAL ONLY—DO NOT WRITE BELOW THIS LINE  acknowledge receipt for the total origin only for USB 28 if more harm one USM 285 is submitted)  No.					1				
Signature of APPS RELOW FOR USE OF U.S. MARSHAL ONLY—DO NOT WRITE BELOW THIS LINE  acknowledge receipt for the total origin only for USB 28 if more harm one USM 285 is submitted)  No.	SPECIAL INST	TRUCTIONS OR OTHER	INFORMATION TH	IAT WILL ASSIST	IN EXPEDITING SE	RVICE (Include Business and A	Alternate A	ddresses.	
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY DO NOT WRITE BELOW THIS LINE  acknowledge receipt for the total unmber of process indicated.  Sign only for USM 285 if more han one USM 285 is submitted)  No. No.  Interview of Authorized USMS Deputy or Clerk origin or No. No.  Interview or the individual, company, corporation, etc. at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.  Interest pectify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)  Name and title of individual served (If not shown above)  The residing in defendants usual place of abode  Address (complete only different than shown above)  Date  Time  Signature of U.S. Marshal or Deputy  Service Fee Total Mileage Charges including endeavors)  Forwarding Fee Total Charges Advance Deposits Amount oved to U.S. Marshal* or (Amount of Refund*)  \$0.00					iii Diiii O ODi	(INCINUE DUSTICSO MINI )	7	tuur Cooco	
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY DO NOT WRITE BELOW THIS LINE  acknowledge receipt for the total number of process indicated.  Sign only for USM 285 if more han one USM 285 if more han one USM 285 is submitted)  hereby certify and return that I may be personally served. have legal evidence of service. have executed as shown in "Remarks", the process described in the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.  I hereby certify and return that I am unable to locate the individual, company, corporation, etc. shown at the address inserted below.  I hereby certify and return that I am unable to locate the individual, company, corporation, etc. shown at the address inserted below.  I hereby certify and return that I am unable to locate the individual, company, corporation, etc. shown at the address inserted below.  Address (Complete only different than shown above)  Date  Time  Signature of U.S. Marshal or Deputy  Signature of U.S. Marshal or Deputy  Service Fee  Total Mileage Charges including endeavors)  Forwarding Fee  Total Charges  Advance Deposits  Amount owed to U.S. Marshal* or (Amount of Refund*)  \$0.00	<u>i</u>							Fold	
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY DO NOT WRITE BELOW THIS LINE  acknowledge receipt for the total number of process indicated.  Sign only for USM 285 if more han one USM 285 if more han one USM 285 is submitted)  hereby certify and return that I may be personally served. have legal evidence of service. have executed as shown in "Remarks", the process described in the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.  I hereby certify and return that I am unable to locate the individual, company, corporation, etc. shown at the address inserted below.  I hereby certify and return that I am unable to locate the individual, company, corporation, etc. shown at the address inserted below.  I hereby certify and return that I am unable to locate the individual, company, corporation, etc. shown at the address inserted below.  Address (Complete only different than shown above)  Date  Time  Signature of U.S. Marshal or Deputy  Signature of U.S. Marshal or Deputy  Service Fee  Total Mileage Charges including endeavors)  Forwarding Fee  Total Charges  Advance Deposits  Amount owed to U.S. Marshal* or (Amount of Refund*)  \$0.00									
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY DO NOT WRITE BELOW THIS LINE  acknowledge receipt for the total number of process indicated.  Sign only for USM 285 if more han one USM 285 if more han one USM 285 is submitted)  hereby certify and return that I may be personally served. have legal evidence of service. have executed as shown in "Remarks", the process described in the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.  I hereby certify and return that I am unable to locate the individual, company, corporation, etc. shown at the address inserted below.  I hereby certify and return that I am unable to locate the individual, company, corporation, etc. shown at the address inserted below.  I hereby certify and return that I am unable to locate the individual, company, corporation, etc. shown at the address inserted below.  Address (Complete only different than shown above)  Date  Time  Signature of U.S. Marshal or Deputy  Signature of U.S. Marshal or Deputy  Service Fee  Total Mileage Charges including endeavors)  Forwarding Fee  Total Charges  Advance Deposits  Amount owed to U.S. Marshal* or (Amount of Refund*)  \$0.00		$\mathcal{L}$							
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY DO NOT WRITE BELOW THIS LINE  acknowledge receipt for the total number of process indicated.  Sign only for USM 285 if more han one USM 285 if more han one USM 285 is submitted)  hereby certify and return that I may be personally served. have legal evidence of service. have executed as shown in "Remarks", the process described in the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.  I hereby certify and return that I am unable to locate the individual, company, corporation, etc. shown at the address inserted below.  I hereby certify and return that I am unable to locate the individual, company, corporation, etc. shown at the address inserted below.  I hereby certify and return that I am unable to locate the individual, company, corporation, etc. shown at the address inserted below.  Address (Complete only different than shown above)  Date  Time  Signature of U.S. Marshal or Deputy  Signature of U.S. Marshal or Deputy  Service Fee  Total Mileage Charges including endeavors)  Forwarding Fee  Total Charges  Advance Deposits  Amount owed to U.S. Marshal* or (Amount of Refund*)  \$0.00									
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY DO NOT WRITE BELOW THIS LINE  acknowledge receipt for the total number of process indicated. Sign only for USM 285 if more number of process indicated. Sign only for USM 285 if more number of process indicated. Sign only for USM 285 if more number of process indicated. Sign only for USM 285 if more number of process indicated. Sign only for USM 285 if more number of process indicated. Sign only for USM 285 if more number of process indicated. Sign only for USM 285 if more number of process indicated. Sign only for USM 285 if more number of process indicated. Sign only for USM 285 if more number of process indicated. Sign only for USM 285 if more number of process indicated. Sign only for USM 285 if more number of process indicated. Sign only for USM 285 if more number of process indicated. Sign only for USM 285 if more number of process indicated. Sign only for USM 285 if more number of process indicated. Sign only for USM 285 if more number of process indicated. Sign at ure of Authorized USMS Deputy or Clerk Date  Date  Time  Signature of Authorized USMS Deputy or Clerk Date  Date  Time  Signature of Authorized USMS Deputy or Clerk Date  Date  Time  Signature of Authorized USMS Deputy or Clerk Date  Time  Signature of Authorized USMS Deputy or Clerk Date  Time  Signature of Authorized USMS Deputy or Clerk Date  Time  Signature of Authorized USMS Deputy or Clerk Date  Time  Signature of Authorized USMS Deputy or Clerk Date  Time  Signature of Authorized USMS Deputy or Clerk Date  Time  Signature of Authorized USMS Deputy or Clerk Date  Time  Signature of Authorized USMS Deputy or Clerk Date  Time  Signature of Authorized USMS Deputy or Clerk Date  Signature of Authoriz	Signature of A	TO CHE NEW CO	service on beh	nalf of:	PLAINTIFF	TELEPHONE NUMBER	DATE		
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY DO NOT WRITE BELOW THIS LINE  acknowledge receipt for the total. Total Process of the process indicated. Sign only for USM 285 if more han one USM 285 if more han one USM 285 is submitted)  hereby certify and return that I have personally served. have legal evidence of service. have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.  Thereby certify and return that I am unable to locate the individual, company, corporation, etc. shown at the address inserted below.  Thereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)  Name and title of individual served (if not shown above)  Address (complete only different than shown above)  Date  Time  Signature of U.S. Marshal or Deputy  Service Fee  Total Mileage Charges including endeavors)  Forwarding Fee  Total Charges  Advance Deposits  Amount owed to U.S. Marshal* or (Amount of Refund*)  \$0.00	U	COSTA MILION	.C 1			510-637-3536	9/10/	08	
acknowledge receipt for the total number of process indicated. Sign only for USM 285 if more han one USM 285 if more han one USM 285 is submitted)  No.	CD A CIE I		CE OF IC M	ADSTIALO	NI V DO NO				
No.	SPACE	BETO MLOK O	SE OF U.S. M	AKSHAL U	NLY DO NC		11112	LINE	
No.			1	I	Signature of Author	ized USMS Deputy or Clerk		Date	
hereby certify and return that I  have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc. shown at the address inserted below.  I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)  Name and title of individual served (if not shown above)  A person of suitable age and discretion then residing in defendant's usual place of abode  Address (complete only different than shown above)  Date  Time  Signature of U.S. Marshal or Deputy  Service Fee  Total Mileage Charges including endeavors)  Forwarding Fee  Total Charges Advance Deposits  Amount owed to U.S. Marshal* or (Amount of Refund*)  \$0.00	(Sign only for U	SM 285 if more	Origin						
In the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.  I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)    A person of suitable age and discretion then residing in defendant's usual place of abode   Address (complete only different than shown above)   Date	than one USM 2	85 is submitted)	No	No					
Name and title of individual served (if not shown above)  A person of suitable age and discretion then residing in defendant's usual place of abode  Address (complete only different than shown above)  Date  Time  Signature of U.S. Marshal or Deputy  Service Fee  Total Mileage Charges including endeavors)  Forwarding Fee  Total Charges  Advance Deposits  Amount owed to U.S. Marshal* or (Amount of Refund*)  \$0.00	I hereby certify on the individua	and return that I have place in the land i	personally served, ctc., at the address sho	have legal evidenc	e of service,  have the individual, compa	executed as shown in "Remarks any, corporation, etc. shown at the	s", the proc ne address	ess described inserted below.	
then residing in defendant's usual place of abode  Address (complete only different than shown above)  Date  Time  Signature of U.S. Marshal or Deputy  Service Fee Total Mileage Charges including endeavors)  Forwarding Fee Total Charges Advance Deposits Amount owed to U.S. Marshal* or (Amount of Refund*)  \$0.00	☐ I hereby ce	rtify and return that I am u	nable to locate the ind	lividual, company, c	orporation, etc. named	above (See remarks below)			
Signature of U.S. Marshal or Deputy  Service Fee Total Mileage Charges including endeavors)  Forwarding Fee Total Charges Advance Deposits Amount owed to U.S. Marshal* or (Amount of Refund*)  \$0.00  REMARKS:	Name and title of	f individual served (if not .	shown above)			then residing in			
Service Fee Total Mileage Charges including endeavors)  Forwarding Fee Total Charges Advance Deposits (Amount owed to U.S. Marshal* or (Amount of Refund*)  \$0.00\$  REMARKS:	Address (comple	ete only different than show	vn above)			Date	Time	ar	
including endeavors)  (Amount of Refund*)  \$0.00  REMARKS:						Signature of U.S. Ma	arshal or D	eputy	
REMARKS:	Service Fee	, , ,	Forwarding Fee	Total Charges	Advance Deposits		al* or		
						\$0.0	0		
	REMARKS:		I	1					
							1		

- 2. USMS RECORD
- 3. NOTICE OF SERVICE
- 4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
- 5. ACKNOWLEDGMENT OF RECEIPT

Page 8 of 10

### INSTRUCTIONS FOR SERVICE OF PROCESS BY U.S. MARSHAL

Please type or print legibly, insuring readability of all copies. DO NOT DETACH ANY COPIES. Submit one complete set of this form (USM-285) and one copy of each writ for each individual, company, corporation, etc., to be served or property to be seized or condemned. The applicable fees for such service(s) (T28, USC Sec. 1921 establishes the fees for service of process by the U.S. Marshal) may be required prior to said service.

For service of any process upon an officer or agent of the United States Government, submit a copy of the writ and a set of Form USM-285 for each officer or agent upon whom service is desired. Submit three (3) additional copies of the writs for service upon the Government of the United States. The U.S. Marshal will serve one (1) upon the U.S. Attorney and will forward two (2) to the Attorney General of the United States. (When the applicable box is checked, completion of the final signature block by the U.S. Marshal or his Deputy always certifies service on the U.S. Attorney and the Attorney General, regardless of whether other defendants on the writ were served.) Failure to provide any of the copies will delay service of the writ,

Complete all entries above the double line. Mark all applicable check boxes and use the "Special Instructions" to advise of any information that will assist the U.S. Marshal in expediting service.

If more than one writ and USM-285 is submitted on a single case, the U.S. Marshal will receipt for all of them on the first USM-285. You will receive for your records the last (No. 5) "Acknowledgment of Receipt" copy for all the USM-285 forms you submit. When the writ is served, you will receive the No. 3 Notice of Service copy. This copy will be identical to the return to the Clerk of the Court.

Upon completion of all services (if the Marshals fees were not requested or tendered in advance or if additional fees are indicated), you will receive a "Billing Statement" (copy 4 of USM-285) from the United States Marshal. (NOTE: Copy 4 should be returned, by you, to the U.S. Marshal, together with your payment of the amount owed.

## USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice United States Marshals Service

# PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

EFENDANT G. ZAVALA,	S. JOHNSON				COURT CASE NUM! C-07-5578-SBA(P		
7 AVALA					TYPE OF PROCESS	,	
1. 221 V / 112/1,	et al.				Summons, Complaint, Order		
(	NAME OF INDIVIDU	AL, COMPANY, CO	RPORATION. ET	C. TO SERVE OR DES	SCRIPTION OF PROPERTY T	O SEIZI	E OR CONDEMN
SERVE 2	M. Williams, Psycl						
AT	P.O. Box 1020 Sol	•	•	Coae)			
END NOTICE (	OF SERVICE COPY TO			ESS BELOW			
					Number of process to be served with this Form 285	3	
Ca	nrison S. Johnson, D lifornia Correctional D. Box 1906				Number of parties to be served in this case	5	
	hachapi, CA 93581			Check for service on U.S.A.			
ll Telephone N	lumbers, and Estimated T	imes Available for S	ervice):				Fold
gnature of Attor	mey other Prejutator requ	uesting service on beh	alf of:	PLAINTIFF	TELEPHONE NUMBER	DAT	E
JES:	STANGSLEY	/		DEFENDANT	510-637-3536	9/1	0/08
			ARSHAL O	NLY DO NO	T WRITE BELOW	THI	S LINE
acknowledge recumber of processign only for US	s indicated.	l Process District of Origin	District to Serve	Signature of Authori	zed USMS Deputy or Clerk		Date
an one USM 28		No	No				
the individual	, company, corporation, e	tc., at the address sho	wn above on the on	the individual, compa	executed as shown in "Remark ny, corporation, etc. shown at the	s", the pi	rocess described ss inserted below
I hereby cert	ify and return that I am ur	nable to locate the ind	ividual, company, c	corporation, etc. named	above (See remarks below)		
ame and title of	individual served (if not s	shown above)			A person of suit then residing in of abode		
ddress (complete	e only different than show	n above)			Date	Time	□ ; □ ;
					Signature of U.S. M	arshal o	Deputy
	Total Mileage Charges including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marsh (Amount of Refund*)		
ervice Fee			i .	i	\$0.0	111	
ervice Fee					\$0.0	, U	
ervice Fee					<b>J</b> 0.0	70	

- 2. USMS RECORD
- 3. NOTICE OF SERVICE
- NOTICE OF SERVICE
   HELLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
   ACKNOWLEDGMENT OF RECEIPT

Form USM-285 Rev. 12/15/80 Automated 01/00

Please type or print legibly, insuring readability of all copies. DO NOT DETACH ANY COPIES. Submit one complete set of this form (USM-285) and one copy of each writ for each individual, company, corporation, etc., to be served or property to be seized or condemned. The applicable fees for such service(s) (T28, USC Sec. 1921 establishes the fees for service of process by the U.S. Marshal) may be required prior to said service.

For service of any process upon an officer or agent of the United States Government, submit a copy of the writ and a set of Form USM-285 for each officer or agent upon whom service is desired. Submit three (3) additional copies of the writs for service upon the Government of the United States. The U.S. Marshal will serve one (1) upon the U.S. Attorney and will forward two (2) to the Attorney General of the United States. (When the applicable box is checked, completion of the final signature block by the U.S. Marshal or his Deputy always certifies service on the U.S. Attorney and the Attorney General, regardless of whether other defendants on the writ were served.) Failure to provide any of the copies will delay service of the writ.

Complete all entries above the double line. Mark all applicable check boxes and use the "Special Instructions" to advise of any information that will assist the U.S. Marshal in expediting service.

If more than one writ and USM-285 is submitted on a single case, the U.S. Marshal will receipt for all of them on the first USM-285. You will receive for your records the last (No. 5) "Acknowledgment of Receipt" copy for all the USM-285 forms you submit. When the writ is served, you will receive the No. 3 Notice of Service copy. This copy will be identical to the return to the Clerk of the Court.

Upon completion of all services (if the Marshals fees were not requested or tendered in advance or if additional fees are indicated), you will receive a "Billing Statement" (copy 4 of USM-285) from the United States Marshal. (NOTE: Copy 4 should be returned, by you, to the U.S. Marshal, together with your payment of the amount owed.